



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Attorney Docket No.: KBI-0003
Inventors: Ranganathan and Dickstein
Serial No.: 09/557,011
Filing Date: April 20, 2000
Examiner: Patricia A. Patten
Group Art Unit: 1654
Title: Compositions and Methods For
Alleviating Symptoms of Uremia in
Patients

"Express Mail" Label No. EV331019535US
Date of Deposit May 12, 2003

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Commissioner for Patents, Mail Stop Non-Fee
Amendment, P.O. Box 1450, Alexandria, VA 22313-1450.

By Jane Massey Licata
Typed Name: Jane Massey Licata, Reg. No. 32,257

Commissioner for Patents
Mail Stop Non-Fee Amendment
P.O. Box 1450
Alexandria, VA 22313-1450

REPLY UNDER 37 C.F.R. § 1.111

This is in response to the Office Action mailed February 10,
2003, setting a three (3) month statutory period for reply.

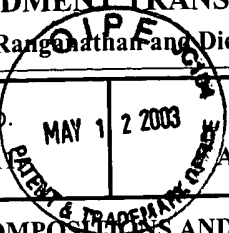
Amendments to the claims are reflected in the listing of
claims which begins on page 2 of this paper.

Remarks begin on page 4 of this paper.

05-13-03

1654

AMENDMENT TRANSMITTAL LETTER (Small Entity)		Docket No. KBI-0003	
Applicant(s): Ranganathan and Dickstein			
Serial No. 09/557,011	Filing Date April 20, 2000	Examiner Patricia A. Patten	Group Art Unit 1654



Invention: **COMPOSITIONS AND METHODS FOR ALLEVIATING SYMPTOMS OF UREMIA IN PATIENTS**

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TO THE ASSISTANT COMMISSIONER FOR PATENTS:

TECH CENTER 1600/2900

Transmitted herewith is an amendment in the above-identified application.

- ☒ Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.
- ☐ A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	4 -	20 =	0 x	\$9.00	\$0.00	
INDEP. CLAIMS	1 -	3 =	0 x	\$42.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619
A duplicate copy of this sheet is enclosed.
 - ☒ Any additional filing fees required under 37 C.F.R. 1.16.
 - ☒ Any patent application processing fees under 37 CFR 1.17.

Dated: May 12, 2003

Signature

Jane Massey Licata
Reg. No. 32,257
Licata & Tyrrell P.C.
66 E. Main Street
Marlton, NJ 08053
Tel: 856-810-1515
Fax: 856-810-1454

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- 1) Amendment Transmittal Letter (Small Entity) (2 copies);
- 2) Reply under 37 C.F.R. § 1.111; and
- 3) Return Post Card.

Jane Massey Licata

JANE MASSEY LICATA